

CHILD SUPPORT ENFORCEMENT TRANSMITTAL #2 – SUBSEQUENT ACTIONS

Petitioner: Name (first, middle, last) IV-D Case: ☐ TANF
Social Security Number ☐ IV-E Foster Care
Tribal Affiliation/Country (if applicable) ☐ Medicaid Only
DOE, JANE ☐ Former Assistance
555-55-5555 ☒ Never Assistance
USA

Respondent: Name (first, middle, last)
Social Security Number
Tribal Affiliation/Country (if applicable)
DOE, JOHN JAMES
444-44-4444
USA

Non-IV-D Case: ☐

File Stamp

To: (Agency Name and Address)
CAROL WORKER
MONTROSE CNTY CSE
100 N GRAND AVE #E
MONTROE, CO 88888

Responding FIPS Code 0808888 State CO
Responding IV-D Case Identifier 44-999999-99-9A
Responding Tribunal Number 099999999

From: (Contact Person, Agency, Address, Phone, FAX, E-mail)
JANET WORKER
SHIAWASSEE COUNTY FRIEND OF
THE COURT /FOC
28 N SHIA STREET
CORUNNA, MI 48888
(999) 777-2222
(999) 777-4444 FAX
JANET.WORKER@SHIACTY.ORG

Initiating FIPS Code 2699999 State MI
Initiating IV-D Case Identifier 999999999
Initiating Tribunal Number 1999999999 UI

Send Payments To: (if different from above)
MISDU
P.O. BOX 30352
LANSING, MI 48909-7852

Payment FIPS Code 2699999 State MI
Bank Account _____ Routing Code _____

I. Action

- | | |
|---|---|
| 1. <input checked="" type="checkbox"/> Status Request | 7. <input type="checkbox"/> Notice of Arrearage Reconciliation/Determination of Sum-Certain |
| 2. <input type="checkbox"/> Status Update | 8. <input type="checkbox"/> Change IV-D Payee of Responding Tribunal Order |
| 3. <input type="checkbox"/> Notice of Hearing | 9. <input type="checkbox"/> Redirect Payment to Obligee State |
| 4. <input type="checkbox"/> Notice of Case Forwarding | 10. <input type="checkbox"/> Other: _____ |
| 5. <input type="checkbox"/> Document Filed | |
| 6. <input type="checkbox"/> Order Issued/Confirmed | |

Please Return the Acknowledgment Attached**II. Additional Information**

☐ Nondisclosure Finding Attached

We are requesting the status of contempt action. Last correspondence NCP was to begin making payments – nothing received. You had advised you would be scheduling for contempt hearing. Has that been scheduled yet?

April 13, 2012 JANET WORKER (999) 777-2222
Date Initiating Contact Person (first, middle, last) Phone Number & Extension

FAX: (999) 777-4444 E-mail: _____

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ACKNOWLEDGMENTS

Return This Form to Initiating State

- ☐ Request Received and No Additional Information is Necessary
☐ Additional Information Needed (See Remarks)
☐ Remarks/Response

☐ Your Case has been Forwarded for Action to:

Name of Worker (first, middle, last)

Agency Name

Address, FIPS code

Phone, Extension & FAX

Date

Person Completing Form (first, middle, last)

Telephone Number & Extension

FAX: _____

E-mail: _____